## **STATEMENT OF**

FORM 1	ORGANIZATION (See instructions)	Office use only
NAME OF COMMITTEE (in	(Check if name Example: If typying, type over the lines	12FE4M5
PNC Bank, Na	tional Association\National City Bank Political Action Com-	
ADDRESS (number and	1900 East 9th Street	
(Check if address is changed)	Locator 01-3025B	
	Cleveland	OH 44114 - 3484
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)	zandra.moss@pnc.com	
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if address is changed)		
2. DATE 1.1	05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
3. FEC IDENTIFICA	TION NUMBER C C00141036	
4 10 THE STATEM	IENT NEW (N) OR X AMENDED (A)	
4. IS THIS STATEM	IENT NEW (N) OR X AMENDED (A)	
Laguit, that the constant		
r certify that I have exami	ned this Statement and to the best of my knowledge and belief it is true, correct and	a complete
Type or Print Name of	Treasurer Joanne Clark	
Signature of Treasurer	Electronically Filed by Joanne Clark	Date 11 1 DDD Y 2009
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the person signing this State ANY CHANGE IN INFORMATION SHOULD BE REPORTED V	,
Office Use Only	For further information of Federal Election Commiss Toll Free 800-424-9530	